

ORIGINAL
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SECTION 6

6.0 REFERENCES FOR SECTIONS 1.0 THROUGH 5.0

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3. United States Environmental Protection Agency, Consolidated Permits Program. Hazardous Waste Permit Application. Form Approved OMB No. 158-580004. January 19, 1982.
4. Williams, Charles M., EMCA, with Lisa Lillis, NUS FIT 3. Meeting. May 9, 1989.
5. United States Environmental Protection Agency. Notification of Hazardous Waste Activity. August 18, 1980.
6. United States Environmental Protection Agency. Acknowledgement of Notification of Hazardous Waste Activity. Undated.
7. United States Environmental Protection Agency, Consolidated Permits Program. General Information Form. Form Approved OMB No. 158-R0175. November 1980.
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10. Ashton, Robert Jr., Solid State Scientific, Incorporated, to Shirley Bulkin, United States Environmental Protection Agency. Correspondence. January 23, 1981.
11. Bulkin, Shirley, United States Environmental Protection Agency, to L.P. Kedson and R.J. Ashton, Solid State Scientific, Incorporated. Correspondence. July 27, 1981.
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13. Anderson, Patrick, United States Environmental Protection Agency, to George Ruthland and Al Corace, Solid State Scientific, Incorporated. Correspondence. February 18, 1982.
14. Pennsylvania Department of Environmental Resources, to Al Corace, Solid State Scientific, Incorporated. Correspondence. March 4, 1983.
15. Luns, Lawrence, Pennsylvania Department of Environmental Resources, to Josephine Hstand, Solid State Scientific, Incorporated. Correspondence. December 14, 1984.
16. Solid State Scientific, Incorporated. Closure Plan. December 1984.
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18. Lynn, Wayne L., Pennsylvania Department of Environmental Resources, to Al Corace, Solid State Scientific, Incorporated. Correspondence. March 28, 1985.
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48. Rand McNally and Company. Commercial Reference Map and Guide. Pennsylvania. 1983.
49. Kulp, Charles, United States Department of the Interior, Fish and Wildlife Service, to Garth Glenn, NUS FIT 3. Correspondence. July 27, 1989.
50. Pennsylvania Department of Environmental Resources. Waste Discharge Inspection Report. October 16, 1975.

CONDITIONS OF OPERATION DURING
INTERIM STATUS

Date Prepared: July 27, 1981

The information shown below is based solely on the information that the owner and operator of this facility submitted in Part A of the Hazardous Waste Permit Application. This is not a determination by EPA that this facility is an environmentally acceptable facility for treating, storing or disposing of the hazardous wastes listed below.

1. Facility name, location, and EPA Identification Number.

Name: Solid State Scientific, Inc.

Location: Commerce & Enterprise Drives
Montgomeryville, PA 18936

EPA I.D. No.: PAD 00 227 8331

II. EPA considers the following to be the owner or operator of the facility and therefore the person(s) who must comply with the requirements set forth in 40 CFR Parts 122 and 265.

Owner's Name: Mr. L. P. Kedson, President

Operator's Name: Mr. R. J. Ashton

III. During the period of interim status, the facility may use only the following processes for treating, storing or disposing of hazardous waste, up to the design capacities that are indicated.

<u>PROCESS</u>	<u>DESIGN CAPACITY</u>
<u>S01</u>	<u>5500 Gals.</u>
<u>S02</u>	<u>1550 Gals.</u>
<u>T01</u>	<u>85,000 Gals/Day</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

IV. During the period of interim status, the facility may handle only the hazardous wastes with the following EPA Hazardous Waste Numbers, and/or solid waste exhibiting hazardous characteristics with the following EPA Hazardous Waste Numbers.

<u>U002</u>	<u>U134</u>	<u>U154</u>	<u>U188</u>	<u>U072</u>
<u>U229</u>	<u>U239</u>	<u>U226</u>	<u>D001</u>	<u>D002</u>



SOLID STATE SCIENTIFIC INC.

MONTGOMERYVILLE, PENNA. 18936 ■ 215-855-8400
TWX 510-661-7267

January 14, 1982

Ms. Shirley Bulkin
Director of Hazardous Waste Permits
E.P.A. Region III
6th and Walnut Street
Philadelphia, PA 19107

Dear Shirley:

As you requested during our telephone conversation on December 10, 1981, the following revisions have been made on the Generators' Notification Forms and the Part A, Treatment Storage and Disposal Permit applications for both out Montgomeryville (PAD002278331) and Willow Grove (PAD000965800) Facilities:

- 1) "D000-TOXIC" has been excluded, and the arsenic material previously listed under this heading will now be implemented under "D001-IGNITABLE" as you requested.
- 2) Notification that both facilities existed prior to the October 30, 1980 amendment and presently have been privileged interim status.
- ✓3) Our treated waste material has been excluded, being that it is monitored by the NPDES Permit program by your indication.
- 4) Our Air Quality Permit Numbers are now included in Form 1, Part 10A.
- 5) Names and telephone numbers have been updated to current status.

Please call me if you require further information or have any questions regarding our permit applications.

Sincerely,

ROBERT ASHTON
Plt. Proj. Coordinator

RA/cd
Enc.

PAD002278331

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☐ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITY, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete item I above)

☒ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

PROCESS DESIGN CAPACITY - For each code entered in column A, enter the design capacity in column B.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of units of measure below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	B	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	M	ACRES	S
CUBIC METERS	C	GALLONS PER HOUR	H	HECTARES	G
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (enter code)				1. AMOUNT (enter code)	
X-1	S 0 2	600		5			
X-2	T 0 3	20		6			
1	S 0 1	5,500		7			
2	S 0 2	2,500		8			
3				9			
4				10			

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE **CODE**
 POUNDS P
 TONS T

METRIC UNIT OF MEASURE **CODE**
 KILOGRAMS K
 METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S90004

IV. DESCRIPTION OF WASTES (continued)											
WASTE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSED							
				1. PROCESS CODES (enter)							
				17	18	19	20	21	22	23	24
1	D 0 0 2	230	T	S	0	1	S	0	2		
2	D 0 0 1	3.11	T	S	0	1	S	0	2		
3	F 0 0 2	1.2	T	S	0	1	S	0	2		
4	F 0 0 3	3	T	S	0	1	S	0	2		
5	F 0 0 5	1	T	S	0	1	S	0	2		
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26											

EPA I.D. NO. (enter from page 1)

(continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 1.

EPA I.D. NO. (enter from page 1)

F	P	A	D	0	0	2	2	7	8	3	3	1	6
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V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

40	°	13	'	45	"
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75	°	13	'	38	"
----	---	----	---	----	---

VIII. FACILITY OWNER

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

Solid State Scientific, Inc.

215-855-8400

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

Commerce Drive

G Montgomeryville

PA

18936

IX. OWNER CERTIFICATION

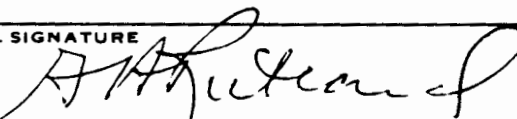
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

George Rutland, President



X. OPERATOR CERTIFICATION

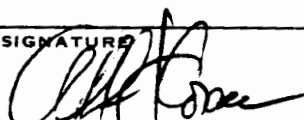
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

Corace, Mgr. of Plt. Services



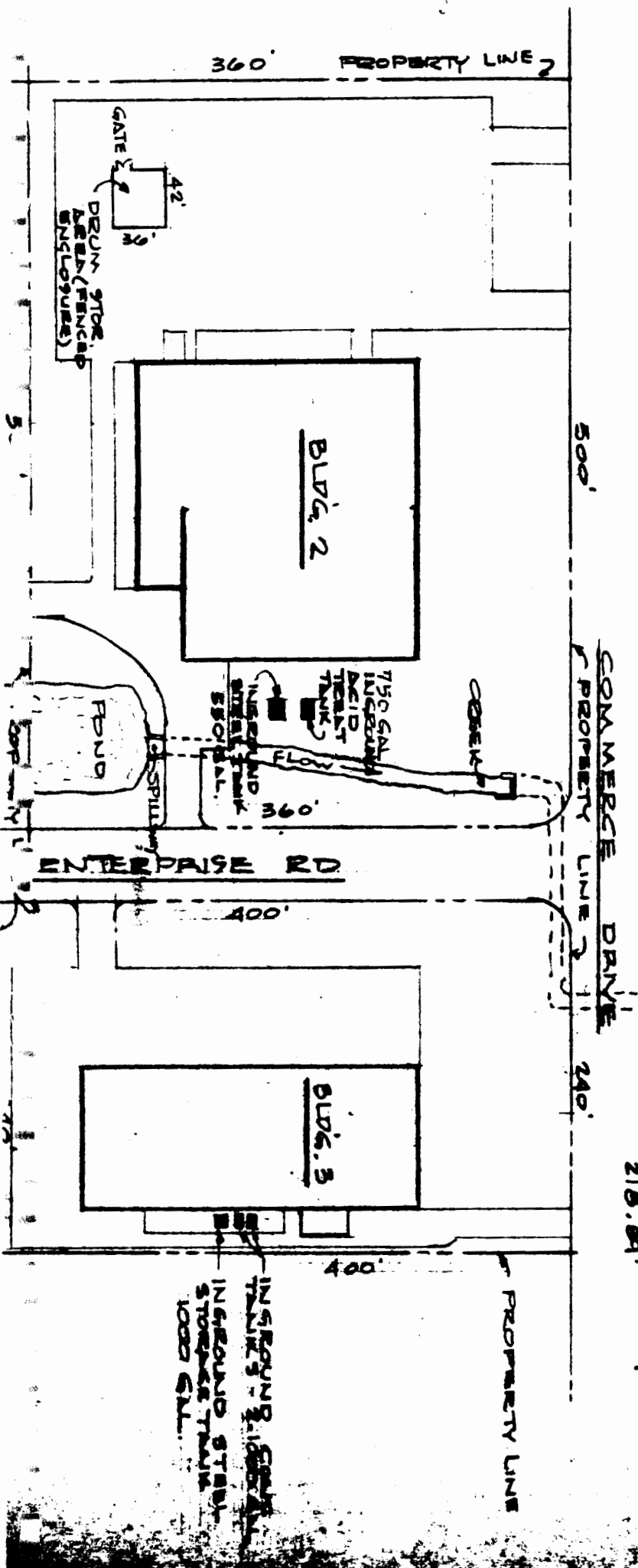
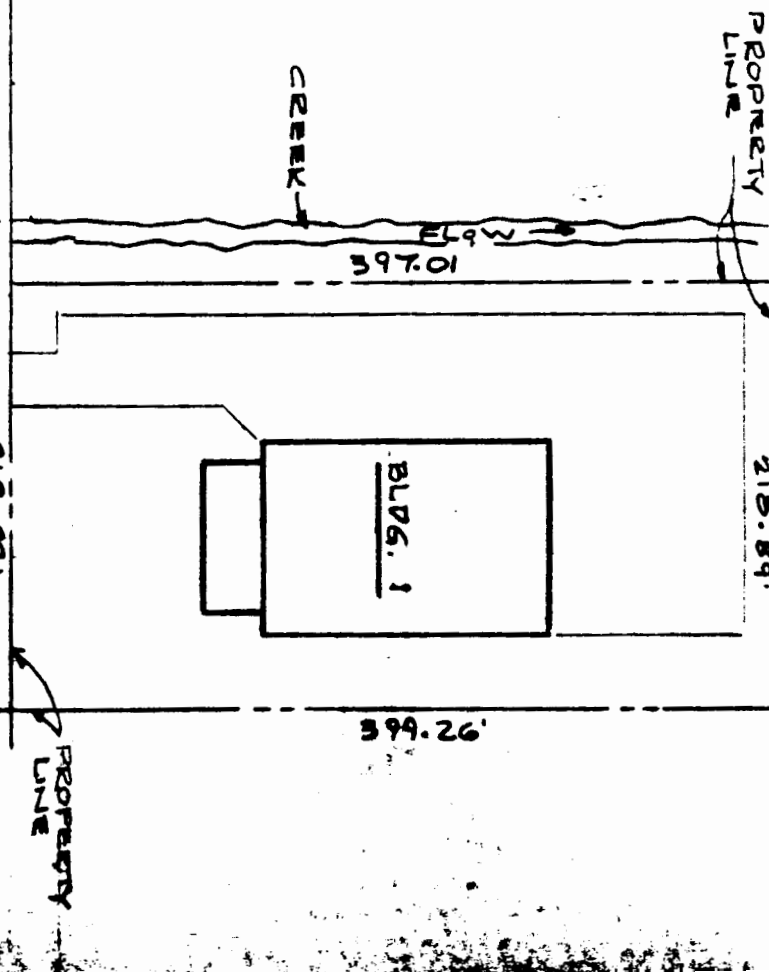
1/19/82

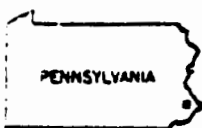
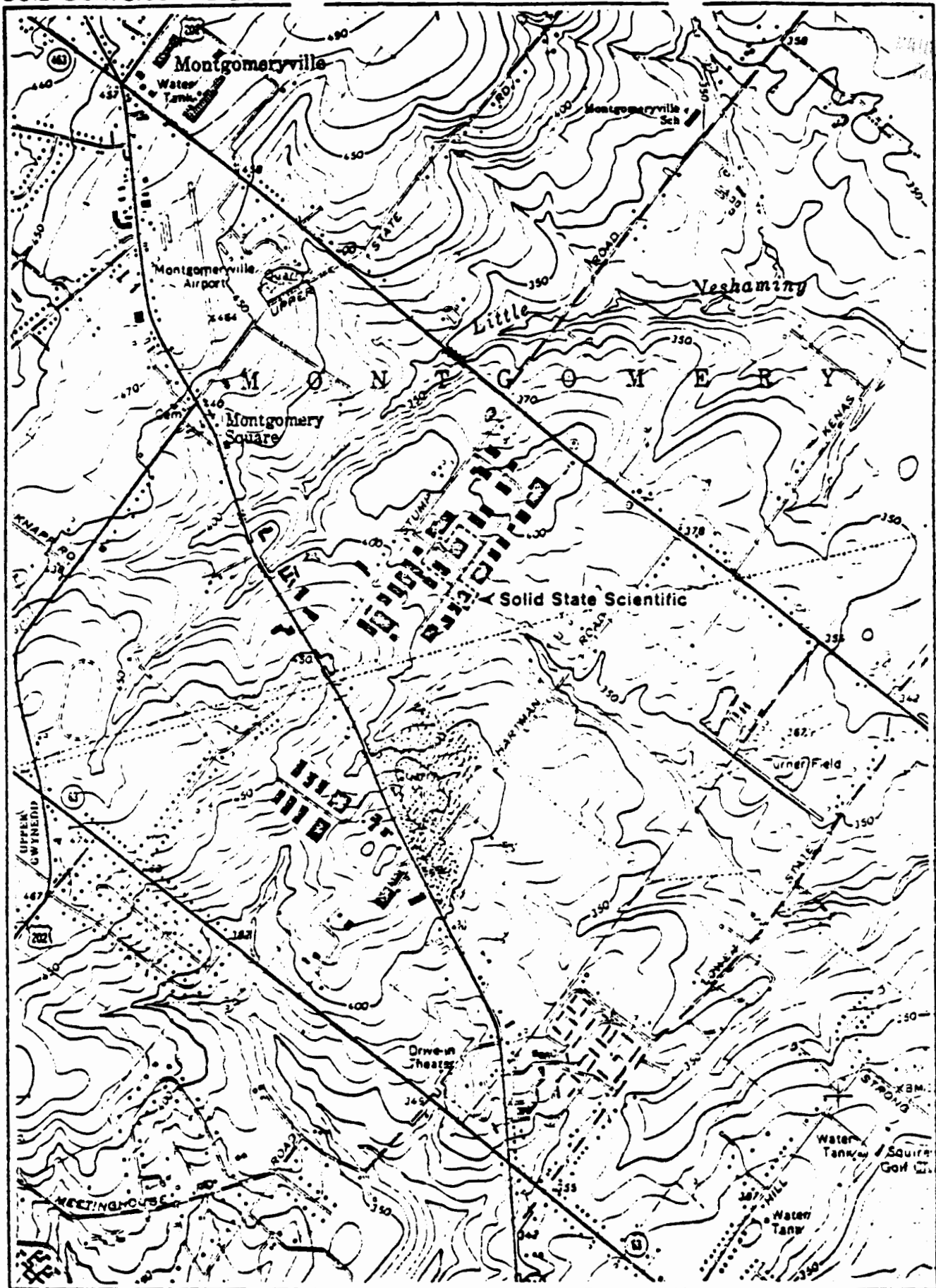
V. FACILITY DRAWING (see page 4)

(Attached)

MONTGOMERYVILLE, PA. 18936

SITE PLAN
SCALE: 1"=100'





QUADRANGLE LOCATION

0 2000 4000 ft N

AMBLER, PA.

Figure 1

Solid State Scientific Location Plan
Montgomeryville, Pa.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS

PHILADELPHIA, PENNSYLVANIA 19106

February 18, 1982

Mr. George Rutland
Solid State Scientific, Inc.
Montgomeryville Industrial Ctr.
Montgomeryville, PA 18936

Re: EPA I.D. No. PAD 00 227 8331

Dear Mr. Rutland:

This is to acknowledge receipt of your letter dated January 14, 1982 in which you request a change to "Conditions of Operations During Interim Status."

Enclosed is an amended form reflecting the change(s). If we can be of any further assistance, please do not hesitate to contact Ms. Joan Henry, a member of my staff, on 215-597-8751.

Sincerely yours,

A handwritten signature in cursive script, reading "Patrick Anderson".

Patrick Anderson
Chief, RCRA Permit and Pesticides Section
Air and Waste Management Division

CONDITIONS OF OPERATION DURING
INTERIM STATUS
AMENDED

Date Prepared: February 18, 1982

The information shown below is based solely on the information that the owner and operator of this facility submitted in Part A of the Hazardous Waste Permit Application. This is not a determination by EPA that this facility is an environmentally acceptable facility for treating, storing or disposing of the hazardous wastes listed below.

I. Facility name, location, and EPA Identification Number.

Name: Solid State Scientific, Inc.

Location: Commerce & Enterprise Drives
Montgomeryville, PA 18936

EPA I.D. No.: PAD 00 227 8331

II. EPA considers the following to be the owner or operator of the facility and therefore the person(s) who must comply with the requirements set forth in 40 CFR Parts 122 and 265.

Owner's Name: Solid State Scientific, Inc.
Attn: George Rutland, President

Operator's Name: Al Corace, Plant Manager

III. During the period of interim status, the facility may use only the following processes for treating, storing or disposing of hazardous waste, up to the design capacities that are indicated.

<u>PROCESS</u>	<u>DESIGN CAPACITY</u>
<u>S01</u>	<u>5500 Gals.</u>
<u>S02</u>	<u>2500 Gals.</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

IV. During the period of interim status, the facility may handle only the hazardous wastes with the following EPA Hazardous Waste Numbers, and/or solid waste exhibiting hazardous characteristics with the following EPA Hazardous Waste Numbers.

<u>D002</u>	<u>D001</u>	<u>F002</u>	<u>F003</u>	<u>F005</u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

CONDITIONS OF OPERATION DURY 7

INTERIM STATUS

AMENDED

Date Prepared: February 18, 1982

The information shown below is based solely on the information that the owner and operator of this facility submitted in Part A of the Hazardous Waste Permit Application. This is not a determination by EPA that this facility is an environmentally acceptable facility for treating, storing or disposing of the hazardous wastes listed below.

1. Facility name, location, and EPA Identification Number.

Name: Solid State Scientific, Inc.

Location: Commerce & Enterprise Drives
Montgomeryville, PA 18936

EPA I.D. No.: PAD 00 227 8331

II. EPA considers the following to be the owner or operator of the facility and therefore the person(s) who must comply with the requirements set forth in 40 CFR Parts 122 and 265.

Owner's Name: Solid State Scientific, Inc.
Attn: George Rutland, President

Operator's Name: Al Corace, Plant Manager

III. During the period of interim status, the facility may use only the following processes for treating, storing or disposing of hazardous waste, up to the design capacities that are indicated.

<u>PROCESS</u>	<u>DESIGN CAPACITY</u>
<u>S01</u>	<u>5500 Gals.</u>
<u>S02</u>	<u>2500 Gals.</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

IV. During the period of interim status, the facility may handle only the hazardous wastes with the following EPA Hazardous Waste Numbers, and/or solid waste exhibiting hazardous characteristics with the following EPA Hazardous Waste Numbers.

<u>D002</u>	<u>D001</u>	<u>F002</u>	<u>F003</u>	<u>F005</u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

CONTINUE ON REVERS

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY													
W P A D 0 0 2 2 7 8 3 3 1													W DUP													
1 2 3 4 5 6 7 8 9 10 11 12													1 2 3 4 5 6 7 8 9 10 11 12													
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																										
EPA HAZARD. WASTE NO. (enter code)		B. ESTIMATED ANNUAL QUANTITY OF WASTE		C. UNIT OF MEASURE (enter code)		1. PROCESS CODES (enter)										2. PROCESS DESCRIPTION (if a code is not entered in D(1))										
1	U 0 0 2	4.5	T	S 0 1	S 0 2																					
2	U 1 3 4	4.2	T	T 0 1																						
3	U 1 5 4	4.55	T	S 0 1	S 0 2																					
4	U 1 8 8	.93	T	S 0 1																						
5	U 0 7 2																									Included above
6	U 2 2 9	4.10	T	S 0 1																						
7	U 2 3 9	7.96	T	S 0 1	S 0 2																					
8	U 2 2 6	2.0	T	S 0 1	S 0 2																					
9	D 0 0 1	66.6	T	S 0 1	S 0 2																					N.O.S.
10	D 0 0 2	66.6	T	S 0 1	S 0 2																					N.O.S.
11	D 0 0 0			S 0 1	S 0 2																					Included above
12																										
13																										
14																										
15																										
16																										
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21																										
22																										
23																										
24																										
25																										
26																										

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

S	T	A	C
F	P	A	D
0	0	2	2
7	8	3	3
1	6		

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

4 00 13 45"

LONGITUDE (degrees, minutes, & seconds)

75 01 38"

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & NO.)

E Solid State Scientific Inc.

215-855-8400

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

E Commerce Drive

G Montgomeryville

PA

18936

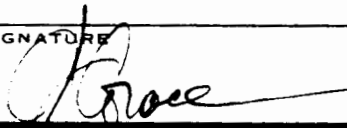
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Leonard P. Kedson, President

B. SIGNATURE



C. DATE SIGNED

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Robert J. Ashton

B. SIGNATURE



C. DATE SIGNED

V. FACILITY DRAWING (see page 4)

12 ch

11/11/86
(11/11/86)

(Attached)

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 1
RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

E	P	A	0	0	0	2	2	7	3	3	3	1
---	---	---	---	---	---	---	---	---	---	---	---	---

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☒ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U

UNIT OF MEASURE	UNIT OF MEASURE CODE
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H

UNIT OF MEASURE	UNIT OF MEASURE CODE
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S		T/A		C					
C		DUP		1					
LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY
1	2	3	4	5	6	7	8	9	10
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	5500	G		7				
2	S 0 2	1550	G		8				
3	I 0 1	85,000	U		9				
4					10				

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 153-S80004

EPA I.D. NUMBER (enter from page 1)												FOR OFFICIAL USE ONLY											
<div style="display: flex; justify-content: space-between;"> W P A D 0 0 2 2 7 8 3 3 1 T/A C </div>												<div style="display: flex; justify-content: space-between;"> W P A D 0 0 2 2 7 8 3 3 1 T/A C </div>											

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE.	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D/1)
1	U 0 0 2	4.5	T	S 0 1 S 0 2	
2	U 1 3 4	4.2	T	T 0 1	delete by entry 4 Jan 82
3	U 1 5 4	4.55	T	S 0 1 S 0 2	
4	U 1 8 8	.93	T	S 0 1	
5	U 0 7 2				Included above
6	U 2 2 9	4.10	T	S 0 1	
7	U 2 3 9	7.96	T	S 0 1 S 0 2	
8	U 2 2 6	2.0	T	S 0 1 S 0 2	
9	D 0 0 1	66.6	T	S 0 1 S 0 2	N.O.S.
10	D 0 0 2	66.6 100.6	T	S 0 1 S 0 2	N.O.S.
11	D 0 0 0			S 0 1 S 0 2	Included above
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F P A D 0 0 2 2 7 8 3 3 1 1 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

4 0 0 1 3 4 5 "

7 5 0 1 3 3 8 "

VIII. FACILITY OWNER

A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

Solid State Scientific Inc.

2 1 5 - 8 5 5 - 8 4 0 0

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

Commerce Drive

G Montgomeryville

P A

1 8 9 3 6

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
1875 New Hope Street
Norristown, PA 19401
215 631-2420



March 4, 1983

Mr. Al Corace
Manager of Building Services
Solid State Scientific, Inc.
Montgomeryville Industrial Center
Montgomeryville, PA 18936

Re: EPA Identification No. PAD002278331
Facility Name: Solid State Scientific, Inc.
Commerce and Enterprise Drive
Montgomery Township, PA 18936

Dear Mr. Corace:

This letter constitutes a formal request for Part B of your application for Hazardous Waste Management Facility Permit under the Hazardous Waste Management Regulations, 25 PA Code Chapter 75, Subchapter D, for the facility referred above. This request is made under the authority of Section 75.265(z)(6) of the regulations. You should refer to the hazardous waste management regulations that appeared in the Pennsylvania Bulletin dated September 4, 1982, which was recently mailed to you for the requirements of the Part B application. Your Part B application must be submitted no later than September 1, 1983. If there is information that is being claimed as confidential, indicate this according to the requirements of Section 75.265(z)(16).

If your facility is not a TSD (treatment, storage or disposal site), or if you stopped functioning as a TSD facility after November 19, 1980, or if you qualify under the Permit by Rule provision of the regulations, it will be necessary for you to contact one of our field offices, and to arrange for an inspection to confirm this. Our field offices and the areas covered are the Bethlehem Office, phone number 861-2070, covering Berks, Lehigh and Northampton Counties; and the Norristown Office, phone number 631-2420, covering Philadelphia, Bucks, Chester, Delaware and Montgomery Counties.

If you functioned as a TSD after November 19, 1980, it will be necessary for you to submit four copies of a closure plan to Mr. Bruce Beitler of this office.

Enclosed are reference checklists for your Part B application that are to be used to insure your application contains the minimum information required. These checklists are to be used to assist you in your Part B application and our subsequent review, although the checklists are not a substitute for reviewing and addressing the hazardous waste regulations themselves. Because you may be anticipating additional facilities at your location, we have included checklists for every type of facility covered by the Department requirements. Please use only those checklists that apply to the types of facilities for which you are making application.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
(215) 270-1920



December 14, 1984

RECEIVED
STATE PROGRAMS SECTION

DEC 20 1984

U.S. EPA, REGION III

Ms. Josephine Histan
Solid State Scientific, Inc.
16 Commerce Drive
Montgomeryville, PA 18936

Re: Closure Plan for Hazardous Waste Facility PAD002278331

Dear Ms. Histan:

I have received either verbal or written communication from you concerning the withdraw of your hazardous waste Part B application. However, we cannot return your hazardous waste Part B application until we have approved a closure plan for your hazardous waste management facility even if you are changing your status from treatment storage or disposal to being a generator only.

Therefore, you should not be functioning as a hazardous waste treatment storage or disposal facility since the time you notified the Department of your intent to withdraw your hazardous waste Part B application.

The closure plan must be submitted to me. Failure to do so by February 1, 1985 may result in legal action being taken against you by the Department. If you have any questions concerning the contents of the closure plan or the number of copies required contact Mr. James Dolan at 861-2070. Other questions can be directed to me at the above phone number.

Very truly yours,

LAWRENCE H. LUNSK
Solid Waste Facilities Supervisor

LHL/bal

CC: Field Supervisor
U.S. EPA Code 3HW31 ✓
Division of Hazardous Waste Management, G. Leader
Re 30



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES



Bethlehem Office
520 East Broad Street
Bethlehem, PA 18018
861-2070

January 7, 1984

Ms. Josephine Histan
Chemical Technician
Solid State Scientific, Inc.
3900 Welsh Road
Willow Grove, PA 19090

Re: Closure Plan for Hazardous Waste
Facility
PAD002278331

Dear Josephine:

This is to acknowledge receipt of the referenced closure plan dated December 21, 1984. It has been assigned to our technical staff for review. Specific comments concerning this review will be forwarded to you in writing. A copy of this plan has been forwarded to DER, Division of Hazardous Waste Management in Harrisburg, U.S. EPA Region III, Philadelphia and Montgomery Township.

If you have any questions concerning this closure, please direct them to me at the above number. If I can be of any other service, please feel free to call.

Very truly yours,

James A. Dolan
Hazardous Waste Coordinator

JAD/bal

CC: Division of Hazardous Waste Management
U.S. EPA Code 3HW31 ✓

RECEIVED
STATE PROGRAMS SECTION

JAN 8 1985

U.S. EPA, REGION III

CP 84-019 copy 3

RECEIVED
STATE PROGRAMS SECTION

JAN 8 1985

U.S. EPA, REGION III

ORIGINAL
Rec'd

SOLID STATE SCIENTIFIC, INC.
Montgomeryville Facility

Closure Plan

December, 1984

CLOSURE PLAN

SSSI's Montgomeryville facility consists of three buildings. Building #1 was utilized for administrative offices. Building #2 contained manufacturing facilities, waste chemical storage areas and a waste treatment plant. Building #3 contained manufacturing facilities. Closure of this facility will be as follows:

Building #2

Closure of the manufacturing facilities in Building #2 will consist of removal and disposal of all chemicals and contaminated piping. The expected maximum amount of chemicals in this area would be ten 55 gallon drums. The area will then be cleaned and any areas of chemical residue will be removed.

Closure of the waste treatment plant will include flushing the piping and tanks and removal and disposal of the rinse water.

Closure of the waste chemical storage areas include removal and disposal of the waste solvent tank and access piping. All waste chemicals in the storage areas will be removed and disposed. The expected maximum amount of waste chemicals will be 15 drums of acid waste, 30 empty waste chemical drums, five drums of solvent waste and 25 drums of miscellaneous chemical waste. After removing and disposing of the drummed chemical waste, the storage area will be cleaned and any areas of chemical residue removed.

Building #3

Closure of the manufacturing area in Building #3 will consist of removal and disposal of all chemicals and contaminated process piping. The expected maximum amount of chemicals in this area would be ten 55 gallon drums. The manufacturing area will then be cleaned and any areas of chemical residue will be removed.

Closure of the Montgomeryville facility in this manner will eliminate the need for any post-closure monitoring since all chemicals will have been removed and the equipment decontaminated.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES



Bethlehem Office
520 East Broad Street
Bethlehem, PA 18018
861-2070

January 7, 1985

Montgomery Township
Box 98
Montgomeryville, PA 18936

Re: Closure of Hazardous Waste Facility
PAD002278331

Gentlemen:

The Department of Environmental Resources has received a closure plan for the following hazardous waste management facility. The plan was submitted as required by Section 75.265(o) of the Solid Waste Management Rules and Regulations:

Solid State Scientific
12 Commerce Drive
Montgomeryville, PA

I have attached a copy of the subject closure plan for your review. If you wish to provide specific recommendations for this facility, please transmit those recommendations within 30 days of receipt of this closure plan. If the Department does not receive comments within the 30 day review period, we shall assume that you waived your right to review.

If you have any questions regarding this matter, please call me.

Very truly yours,

James A. Dolan
Hazardous Waste Coordinator

JAD/bal

CC: U.S. EPA Code 3HW31 ✓
Field Supervisor
Division of Hazardous Waste Management

Attachment

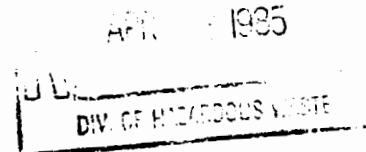


COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
1875 New Hope Street
Norristown, PA 19401
215 270-1920



March 28, 1985

Mr. Al Corace
Manager of Building Services
Solid State Scientific, Inc.
Montgomeryville Industrial Center
Montgomeryville, PA 18936



Re: PAD002278331
Solid State Scientific, Inc.
Montgomeryville Facility

Dear Mr. Corace:

We have completed the review of your hazardous waste facility closure plan submitted after the withdrawal of your hazardous waste Part A application.

Your closure plan has been found to be acceptable. I am returning your hazardous waste Part A application and you will now be considered a hazardous waste facility generator only which terminates your interim status as a hazardous waste container storage, tank storage and tank treatment facility.

We are now closing our records on the review of this application.

Very truly yours,

WAYNE L. LYNN
Regional Solid Waste Manager

cc: Montgomery Township
Montgomery County Planning Commission
Mr. Danyliw
Re 30 2W87.16



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES



Bethlehem Office
520 East Broad Street
Bethlehem, PA 18018
861-2070

March 28, 1985

Ms. Josephine Histan
Chemical Technician
Solid State Scientific, Inc.
3900 Welsh Road
Willow Grove, PA 19090


Re: Closure of Hazardous Waste Management Facility
PAD002228331
Plan Revision

Dear Josephine:

This is to acknowledge receipt of the subject plan revision dated March 26, 1985. As indicated in my March 11, 1985 correspondence, closure may proceed. Please forward the completed closure certifications to this office. Upon receipt of these certifications, a final closure inspection will be scheduled.

Thank you for your cooperation. If I can be of any further assistance please do not hesitate to call.

Best regards,


James A. Dolan
Hazardous Waste Coordinator

JAD/bal

CC: U.S. EPA Code 3HW33 ✓
Division of Hazardous Waste Management



Rick *Joe J. Doyle Jr.*

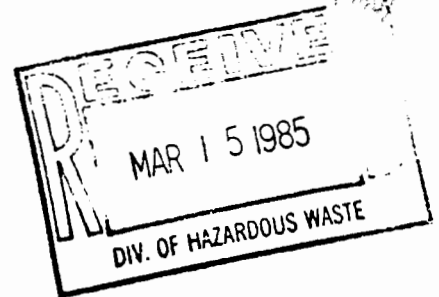
COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES



Bethlehem Office
520 East Broad Street
Bethlehem, PA 18018
861-2070

March 11, 1985

Ms. Josephine Histan
Chemical Technician
Solid State Scientific, Inc.
3900 Welsh Road
Willow Grove, PA 19090



Re: Closure of Hazardous Facility
PAD002278331 *wrong # (?)*

Dear Josephine:

The referenced closure plan has been reviewed by our technical staff. In order to grant final approval, the following information will be required.

1. A complete description of the areas to be closed.
This should include:
 - a) Dimensions and capacities
 - b) Materials of construction
 - c) Additional equipment which may require decontamination such as sumps, pads, pumps, etc.
 - d) Surrounding area description delineating paved and unpaved areas.
 - e) Site history including a description of the materials managed on site and any spill or release incidents.
 - f) Results of a visual inspection. For paved drum storage areas this should include a description of the pad, curbs, sumps, and surrounding areas. Conditions to be noted should include cracks, stains, residue, and denuded areas which should be vegetated. Outside storage tanks should be inspected for similar evidence of spills and contamination.

ORIGINAL
(Red)

E3-8903-66



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

PA 2443

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Solid State Scientific, Incorporated		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER Commerce and Enterprise Drives				
03 CITY Montgomeryville	04 STATE PA	05 ZIP CODE 18936	06 COUNTY Montgomery		07 COUNTY CODE 091	08 CONG DIST PA-13
09 COORDINATES LATITUDE 40° 13' 42.0" N		LONGITUDE 075° 13' 37.0" W				
10 DIRECTIONS TO SITE (Starting from nearest public road) From Pennsylvania turnpike, follow Route 309 north to Stump Road. Turn right onto Stump Road and right onto Enterprise Drive.						

III. RESPONSIBLE PARTIES

01 OWNER (If known) Solid State Scientific, Incorporated		02 STREET (Business, mailing, residential) 160 Commerce Drive				
03 CITY Montgomeryville	04 STATE PA	05 ZIP CODE 18936	06 TELEPHONE NUMBER (215) 657-8400			
07 OPERATOR (If known and different from owner) (Same as above)		08 STREET (Business, mailing, residential)				
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()			
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: <input type="checkbox"/> G. UNKNOWN						

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☒ A. RCRA 3001 DATE RECEIVED: 08 / 15 / 80 ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 d) DATE RECEIVED: / / ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 05 / 09 / 89 <input type="checkbox"/> NO		02 (Check all that apply) <input type="checkbox"/> A. EPA <input checked="" type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: CONTRACTOR NAME(S): NUS Corporation			
03 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN Solid State		04 YEARS OF OPERATION unknown 1986 <input type="checkbox"/> UNKNOWN BEGINNING YEAR ENDING YEAR			

05 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Unknown concentrations of volatile contaminants were detected in soils prior to removal of the underground solvent storage tank. Heavy metals (zinc and hexavalent chrome) were detected in wastewater treatment effluents. Sources were removed prior to 1988.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

Sources of documented contamination have been removed. Current site conditions maintain adequate containment measures. Potential groundwater concern and surface water leaching from former site conditions may exist.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Impacts)
☐ A. HIGH ☐ B. MEDIUM ☐ C. LOW ☒ D. NONE
(Inspection required promptly) (Inspection required) (Inspect on time available basis) (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT James Harper	02 OF (Agency Organization) US EPA - Region III		03 TELEPHONE NUMBER (215) 597-0823	
04 PERSON RESPONSIBLE FOR ASSESSMENT Lisa Lillis	05 AGENCY NUS	06 ORGANIZATION FIT 3	07 TELEPHONE NUMBER (215) 687-9510	08 DATE 06 / 30 / 89 MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 2 - WASTE INFORMATION

IDENTIFICATION

01 STATE	02 SITE NUMBER
PA	2443

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (<i>Check all that apply</i>)	02 WASTE QUANTITY AT SITE <i>(Measure of waste quantities must be independent)</i>	03 WASTE CHARACTERISTICS (<i>Check all that apply</i>)
<input checked="" type="checkbox"/> A SOLID <input type="checkbox"/> B. POWDER, FINES <input type="checkbox"/> C SLUDGE <input type="checkbox"/> D OTHER _____ <i>(Specify)</i>	<input type="checkbox"/> E SLURRY <input checked="" type="checkbox"/> F LIQUID <input type="checkbox"/> G GAS TONS _____ CUBIC YARDS <u>unknown</u> NO OF DRUMS _____	<input checked="" type="checkbox"/> A TOXIC <input type="checkbox"/> B. CORROSIVE <input type="checkbox"/> C RADIOACTIVE <input type="checkbox"/> D PERSISTENT <input type="checkbox"/> E. SOLUBLE <input type="checkbox"/> F. INFECTIOUS <input type="checkbox"/> G. FLAMMABLE <input type="checkbox"/> H IGNITABLE <input checked="" type="checkbox"/> I HIGHLY VOLATILE <input type="checkbox"/> J EXPLOSIVE <input type="checkbox"/> K REACTIVE <input type="checkbox"/> L INCOMPATIBLE <input type="checkbox"/> M NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	Q1 GROSS AMOUNT	Q2 UNIT OF MEASURE	Q3 COMMENTS
SLU	SLUDGE			Solvents (volatile) were detected in a monitoring well and soils near a solvent storage tank.
OLW	OILY WASTE			
SOL	SOLVENTS	unknown		
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			Heavy metals were detected at levels exceeding criteria for a wastewater treatment effluent.
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS	unknown		

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

[illegible]

V. FEEDSTOCKS (See Appendix for CAS Numbers)	N/A
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CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state/fed. sample analysis, reports.)

PA DER Bureau of Water Quality file information for site no. 46-940.
Pantelidou, Sarah, PA DER to Bruce Beitler, PA DER. Correspondence. October 13, 1987.